

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | |
|--|--------------------------------|
| Inventor: Oron, et al. | Customer No. 27498 |
| Appln No: New | Atty Docket No. 009584-0307530 |
| Filing Date: Herewith | Client Ref: AFC-009 |
| Title: Method and System for ATM Virtual Circuit Numbering | Date: January 28, 2004 |

Express Mail Label No. EV 342 415 545 US
Date of Deposit: January 28, 2004

I hereby certify that this paper and attachments identified below are being deposited with the United States Postal Service as "Express Mail Post Office to Addressee, under 35 CFR 1.10 addressed to Mail Stop Patent Applications, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated above.

By: Kathleen M. Smith**MAIL STOP: PATENT APPLICATIONS**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Transmitted herewith for filing is the Patent Application of Moshe Oron, Paul Warner and Shimon Hochbaum

For: Method and System for ATM Virtual Circuit Numbering

Enclosed are:

- ☒ 13 pages of specification, claims and abstract
- ☒ 4 sheets formal drawings
- ☒ Request for Non-Publication
- ☐ Signed declaration
- ☐ Combined Declaration and Power of Attorney of Inventor
- ☐ Assignment to _____
- ☐ Power of Attorney of Assignee and Exclusion of Inventors
- ☐ Information Disclosure Statement; [] references

RECEIVED

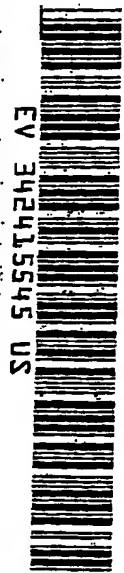
AUG 26 2004

OFFICE OF PETITIONS

PILLSBURY WINTHROP LLP

David A. Jakopin
David A. Jakopin, Reg. No. 32,995

REPLY TO Customer No. 27498



EV 342415545 US

Customer Copy
Valid 11/5 June 2002

ORIGIN (POSTAL USE ONLY)

| | | |
|--|--|--|
| PO ZIP Code | Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second | Flat Rate Envelope <input type="checkbox"/> |
| Date In Mo. Day Year | Time In <input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM | Postage \$ |
| Time In Mo. Day Year | Time In <input type="checkbox"/> AM <input type="checkbox"/> PM | Return Receipt Fee |
| Weight lbs. ozs. | Int'l Airline Country Code | COD Fee Insurance Fee |
| No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday | Acceptance Clerk Initials | Total Postage & Fees \$ |

UNITED STATES POSTAL SERVICE
DELIVERY (POSTAL USE ONLY)

| | | |
|----------------------------------|---|--------------------|
| Delivery Attempt Mo. Day Year | Time <input type="checkbox"/> AM <input type="checkbox"/> PM | Employee Signature |
| Delivery Attempt Mo. Day Year | Time <input type="checkbox"/> AM <input type="checkbox"/> PM | Employee Signature |
| Delivery Date Mo. Day Year | Time <input type="checkbox"/> AM <input type="checkbox"/> PM | Employee Signature |

METHOD OF PAYMENT: X940389

Post Office Agency Acct. No. or
Postal Service Acct. No.

FROM: PLEASE PRINT

ATTN: *D. Galt*
PILLSBURY WINTHROP LLP
2550 MANOVER ST
PALO ALTO CA 94304-1115

609584-0807530 APC 609

TO: PLEASE PRINT

COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA VA 22313-1450

Had fty Patent App.



PRESS HARD. You are making 3 copies. FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com



31 AVAILABLE COPY

RECEIVED

AUG 26 2004

OFFICE OF PETITIONS